Minutes of the 1st State Quality Assurance Committee Meeting held on 29/03/2014 at 10.30 A.M. in the Conference Hall of the Principal Secretary to Govt. Of Odisha, Health & FW Dept.

The 1st meeting of the state Quality Assurance Committee under Family Planning Indemnity Scheme was held under the Chairpersonship of the Principal Secretary Health and Family welfare, Government of Odisha on 29th March 2014. The member present in the meeting is annexed.

At the outset, Director, Family welfare welcome all the members and briefed regarding the family Planning Insurance Scheme and its genesis and mentioned that after 1st April 2013 the insurance claims following sterilization procedure to be met under the new Family Planning Indemnity scheme as per the NHM PIP. After wards, Deputy Director (Demography & Statistics) shared the status on claims following sterilization procedure from 2010 onwards. A total 107 number of cases were returned and 143 numbers of cases were rejected by ICICI Lombard from 1st January 2010 to 31st March 2013, as reported till date.

Under Family Planning Indemnity Scheme total 368 numbers of claims following sterilization procedure (death -07, Failure-343 and complication-18) for the period April 2013 to 29th March 2013were received by the Director, Family Welfare, Odisha from 22 districts. These claims were submitted before the committee for approval. The technical committee analysed the 29 controversial failure cases and recommended 17 failure claims for settlement, 9 claims were rejected and 3 claims were returned due to want of documents. Further from 18 complication Claims, the committee approved 17 claims and one claim could not be considered due to want of requisite documents. Finally the State Quality Assurance Committee have unanimously decided to approve. 7 death claims, 312 failure claims and 17 complication claims amounting to Rs. 1,05,93,479/- towards payment to the beneficiaries/Claimants during the year 2013-14 under Family Planning Indemnity Scheme.

A status report of all the pending returned and rejected cases following sterilization procedure from ICICCI Lombard for the period 2010 to 31st March 2013 to be enumerated and the same will be resubmitted to the ICICI Lombard by the district authorities on or before 15th April 2014 positively for its settlement. ICICI Lombard will support in providing the details of claims received for the above mentioned period with the reasons of rejection and return per case basis.

Action: Director, Family welfare & ICIC Lombard

All the cases (Complication, failure, death) following sterilization procedure from 2005 onwards till 31st March 2013 including cases pending with the court will be estimated for across the state and a request letter will be sent to Government of India with the signature of Principal Secretary for placement of fund for the enumerated cases for the period 2005 to 2013 prior to the implementation of Family Planning Indemnity Scheme.

Action: Director, Family welfare

It was decided to focus on fixed day family planning service in all the designated facilities for ensuring quality service. Camp approach is to be avoided and in case of need necessary arrangement to be made as per the court directives, i.e. strictly adhering to the norm for the surgery.

Action: Director, Family welfare

It was decided that Director, Family Welfare Odisha will be the convenor of this committee as the nodal director for all RMNCH+A intervention in the state.

Subsequent to discussion of Family Planning activities, Consultants (Technical & Management) QI & QA cell, NHM presented brief outline of the reconstituted State Quality Assurance Committee (SQAC) as per new operational guidelines of Govt of India of November 2013. The scope of the Quality Assurance activities has been expanded beyond Family Planning to include all services envisaged under the RMNCH+A, Disease Control Programme & other hospital services and accordingly the SQAC has been restructured. The role, responsibility and composition of State Quality Assurance Committee (SQAC), District Quality Assurance Committee (DQAC), State Quality Assurance Unit (SQAU), District Quality Assurance Unit (DQAU) & District Quality Team (DQT) was discussed and spelt out.

Achievements at State level vis a vis the roadmap for Quality improvement process as laid down by Govt of India was also presented along with prospective planning for improving & sustaining the quality of services in public health facilities. The organizational framework has been set up, customisation of measurable elements, check list and scoring system as per state needs has been disseminated, 3 members of D District Quality Team (DQT) (ADMO (Med) Hospital Manager, Matron/Asst. Matron) were oriented on Quality Assurance & State level TOT and capacity building of DP mentors has been initiated. The following decisions were taken.

ADMO (FW) will head the District Quality Assurance Unit and MBBS Doctors with Diploma in Public Health (DPH) from the regular cadre will be redeployed/repositioned at district head quarter to work as Technical Consultant Quality Assurance of DQAU. One management Consultant Quality Assurance will be appointed through the aegis of NHM with effect from the year 2014-15. The SHRMU will put up the list of doctors with DPH qualification for posting.

It was discussed that Quality Improvement Process (QIP) for improving Maternal Health Services is going on in 6 District Quarter Hospital with support from TMST. It was decided that Quality Improvement Process (QIP) will be extended to all 32 DHHs.

In the 1st phase Standardization of OT & LR of all 32 DHH will be done on priority & subsequently 95 FRUs and 3 Medical College & Hospital will be taken up for the same purpose.

Supportive supervisory visits will be undertaken on monthly basis by Integrated Monitoring Team along with representatives from UNFPA & UNICEF to monitor and asses the quality of services as well as the internal monitoring and mentoring team's activity.

Maternal Death Review & Child Death Review meetings will be given top priority and few cases of the Maternal Death & Child Death selected at random will be reviewed in the SQAC meeting for authenticity and accuracy.

IMEP activity including Bio Medical waste Management will be given adequate emphasis and the Integrated Monitoring Team will also pay due attention to this aspect during field visit. The mentoring team will ensure the quality implementation of these practices.

A letter will be forwarded to all the concerned CDMOs for meticulous supervision for sustenance of ISO 9001:2008 standards with motivation and involvement of all the staffs of the DHH with laid down standard operating procedures.

DFW, Odisha Convenor, SQAC

MD, NHM cum Vice Chairperson State Quality Assurance Committee,

Principal Secretary cum Chairperson, State Quality Assurance Committee,

Govt. Of Odisha, Health & FW Department.

1. Sj. P.K. Mahapatra, IAS	Principal Secretary, Govt. Of Odisha, Health & FW Department
2. Dr. N.K. Das	Spl. Secretary (T)
3. Mrs. Roopa Mishra, IAS	Mission Director, NHM, Odisha
4. Dr. Nirmala Dei	DFW
5. Dr. N.K. Mishra	DHS
6. Dr. S. Bag	DMET
7. Dr. R.R. Hazra	Director - Nurshing
8. Dr. P.K. Acharya	Director - Capital Hospital
9. Dr. P.C. Mohapatra	Prof. HOD (O&G) – SCB,MCH
10. Dr. P.K. Rath	HOD, Surgery - SCB,MCH
11. Dr. Nibedita Pan	Prof. HOD (Anaesthesiology) – SCB,MCH
12. Dr. Anil Kumar Mohanty	HOD (Paediatric) - SCB,MCH
13. Dr. Kailash Ch. Das	Addl. Director – SIHFW
14. Dr. Dhaneswar Sahoo	CDMO, Khurdha
15. Dr. S.N. Swain	JD (FW)
16. Dr. Dinabandhu Sahoo	JD (T) – NHM
17. Mr. R.K. Mishra	Dy. Dir (D&S)
18. Dr. K. K. Das	Dy. Dir – SIHFW
19. Dr. D.K. panda .	
20. Dr. S. Mahapatra	Team Leader, SHSRC, NHM
21. Mr. M. Pradhan	- Consultant, QIQA
	Legal Advisor, O/o - DFW(O)

Consultant - NHM

Addl. Prof, IIPHB (PHFI)

22. Dr. Manoranjan Mohapatra

23. Dr. Sanghamitra Pati